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HOUSE BILL NO. 1650



Clerk

HOUSE BILL NO. 1650

AN ACT MAKING AN APPROPRIATION TO THE GOVERNOR'S OFFICE-DIVISION OF MEDICAID FOR THE PURPOSE OF PROVIDING MEDICAL ASSISTANCE UNDER THE MISSISSIPPI MEDICAID LAW AND DEFRAYING THE EXPENSES OF THE ADMINISTRATION OF THAT LAW FOR THE FISCAL YEAR 2017.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

SECTION 2. The following sum, or so much thereof as may be necessary, is appropriated out of any money in the State Treasury to the credit of the Medical Care Fund created by Section 43-13-143, Mississippi Code of 1972, for the purpose of providing

medical assistance under the Mississippi Medicaid Law for the fiscal year beginning July 1, 2016, and ending June 30, 2017.....\$ 408,319,013.00.

Prior period recovery of funds may be maintained and expended by the division when the recovery is received or finalized. Any recoveries due to audits or third party recoveries may be used to offset the cost of such audits and third party recoveries and as such, the division may escalate Contractual Services as needed for these purposes.

The above funds shall be allocated as follows:

CHIP Program at 200% level of poverty	\$ 2,879,024.00
Eyeglasses for adults	\$ 699,191.00
Home and Community Waiver Program	\$ 1,972,132.00
Disabled worker buy-in to the Medicaid	
program	\$ 754,715.00
Dental fee increase	\$ 904,837.00
Medical Program Matching Funds	\$ 80,097,086.00
	 ROOTOR MARRIAGON TOTAL

It is the intention of the Legislature that funds may be shifted among the above allocated line items where needed in the discretion of the Executive Director of the Division of Medicaid.

SECTION 5. The following sum, or so much thereof as may be necessary, is appropriated out of any money in the State Treasury to the credit of the Capital Expense Fund, as created in Section 27-103-303, Mississippi Code of 1972, and allocated in a manner as determined by the Treasurer's Office for the purpose of defraying the expenses of the Governor's Office - Division of Medicaid for the fiscal year beginning July 1, 2016, and ending June 30, 2017.

SECTION 6. Of the funds appropriated under the provisions of this act, the following positions are authorized:

AUTHORIZED POSITIONS:

Permanent:	Full	Time	1,028
	Part	Time	2
Time-Limited:	Full	Time	37
	Part	Time	0

With the funds herein appropriated, it shall be the agency's responsibility to make certain that funds required to be appropriated for "Personal Services" for Fiscal Year 2018 do not exceed Fiscal Year 2017 funds appropriated for that purpose, unless programs or positions are added to the agency's Fiscal Year 2017 budget by the Mississippi Legislature. Based on data provided by the Legislative Budget Office, the State Personnel Board shall determine and publish the projected annual cost to fully fund all appropriated positions in compliance with the provisions of this act. It shall be the responsibility of the agency head to ensure that no single personnel action increases this projected annual cost and/or the Fiscal Year 2017 appropriations for "Personal Services" when annualized, with the exception of escalated funds and the award of benchmarks. the time the agency takes any action to change "Personal Services," the State Personnel Board determines that the agency has taken an action which would cause the agency to exceed this projected annual cost or the Fiscal Year 2017 "Personal Services" appropriated level, when annualized, then only those actions which reduce the projected annual cost and/or the appropriation requirement will be processed by the State Personnel Board until such time as the requirements of this provision are met.

Any transfers or escalations shall be made in accordance with the terms, conditions and procedures established by law or allowable under the terms set forth within this act. The State Personnel Board shall not escalate positions without written approval from the Department of Finance and Administration. The Department of Finance and Administration shall not provide written approval to escalate any funds for salaries and/or positions without proof of availability of new or additional funds above the appropriated level.

No general funds authorized to be expended herein shall be used to replace federal funds and/or other special funds which are being used for salaries authorized under the provisions of this act and which are withdrawn and no longer available.

None of the funds herein appropriated shall be used in violation of Internal Revenue Service's Publication 15-A relating to the reporting of income paid to contract employees, as interpreted by the Office of the State Auditor.

SECTION 7. It is the intention of the Legislature that the Governor's Office - Division of Medicaid shall maintain complete accounting and personnel records related to the expenditure of all funds appropriated under this act and that such records shall be in the same format and level of detail as maintained for Fiscal Year 2016. It is further the intention of the Legislature that the agency's budget request for Fiscal Year 2018 shall be submitted to the Joint Legislative Budget Committee in a format and level of detail comparable to the format and level of detail provided during the Fiscal Year 2017 budget request process with the Children's Health Insurance Program (CHIP) being separated

from the Medical Services Program and submitted as a separate program. In addition, the performance measures reported for the Medical Services Program shall include an unduplicated case count of individuals served by eligibility status, and the number and the costs of emergency room visits.

SECTION 8. In compliance with the "Mississippi Performance Budget and Strategic Planning Act of 1994," it is the intent of the Legislature that the funds provided herein shall be utilized in the most efficient and effective manner possible to achieve the intended mission of this agency. Based on the funding authorized, this agency shall make every effort to attain the targeted performance measures provided below:

Target

FY2017

Performance Measures

Administrative Services

Administration as a Percent of

Total Budget (%)

Third Party Funds Recovered (\$)

30,855,121.00

Clean Claims Percent - 30 Days

from Receipt (%)

99.00

3.66

Clean Claims Percent - 90 Days

from Receipt (%)

100.00

Providers Submitting Electronic

Claims (Number of)

22,350.00

Third Party Liability Costs

Avoided (\$)	1,386,109.00
Percentage of Applications Processed Within	
Standard of Promptness - Medicaid (%)	90.00
Turnover Rate of Employees (%)	11.00
Medical Services	
Recipients Enrolled (Persons)	731,855
Percent Change in Number of Recipients	
Enrolled from Prior Year (%)	1.20
Elderly & Disabled - Persons Served	
Emergency Room Visits (\$)	62,898,058.00
Emergency Room Visits (Number of)	372,996
Child Physical Exams	316,890
Adult Physical Exams	1,733
Number of Fraud & Abuse Cases	
Investigated	175
Kidney Dialysis (Number of Trips)	493,552
MSCAN Diabetic Members Aged 17-75	
Receiving HBA1c Test (%)	82.10
MSCAN Members with Persistent	
Asthma are Appropriately	
Prescribed Medication (%)	75.66
Number of Medicaid Providers	35,000
Percent Change in Number of Providers from	
Prior Year (%)	2.00
Rate of EPSDT Well Child Screening	75.00

Medicaid Beneficiaries Assigned to a	
PCP (Primary Care Physician)	585,000
Percent of Medicaid Beneficiaries Assigned	
to a PCP (Primary Care Physician) (%)	70.00
Number of Medicaid Beneficiaries Assigned	
to a Managed Care Company	585,000
Percent Change in Number of Beneficiaries	
Assigned to a Managed Care Company (%)	5.00
Child's Health Ins Prg (chip)	
CHIP Enrollees (Number of)	49,983
Percentage of Applications Processed Within	
Standard of Promptness - CHIP (%)	90.00
Home & Com Based Waiver Prg	
Elderly & Disabled - Persons Served	20,000
Elderly & Disabled - Funded Slots	17,800
Elderly & Disabled - Total Auth Slots	28,000
(E&D) Change in Persons on Waiting List (%)	3.00
Assisted Living - Persons Served	630
Assisted Living - Funded Slots	628
Assisted Living - Total Auth Slots	1,000
(AL) Change in Persons on Waiting List (%)	20.00
Independent Living - Persons Served	2,850
Independent Living - Funded Slots	2,850
Independent Living - Total Auth Slots	5,500
(IL) Change in Persons on Waiting List (%)	5.00

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Traumatic Brain Inj - Persons Served		900
Traumatic Brain Inj - Funded Slots	*	900
Traumatic Brain Inj - Total Auth Slots		2,700
(TBI) Change in Persons on Waiting List (%)		76.00
Intellectual Disab - Persons Served		2,700
Intellectual Disab - Funded Slots		2,200
Intellectual Disab - Total Auth Slots		2,900
(ID) Change in Persons on Waiting List (%)		10.00

A reporting of the degree to which the performance targets set above have been or are being achieved shall be provided in the agency's budget request submitted to the Joint Legislative Budget Committee for Fiscal Year 2018.

SECTION 9. It is the intention of the Legislature that whenever two (2) or more bids are received by this agency for the purchase of commodities or equipment, and whenever all things stated in such received bids are equal with respect to price, quality and service, the Mississippi Industries for the Blind shall be given preference. A similar preference shall be given to the Mississippi Industries for the Blind whenever purchases are made without competitive bids.

SECTION 10. Of the funds appropriated herein, an amount not to exceed Two Hundred Fifty Thousand Dollars (\$250,000.00) is provided to implement an Adult Foster Care program for Medicaid recipients as authorized by Section 43-13-117, Mississippi Code of 1972.

SECTION 11. The division shall provide statistical and financial reports on a monthly basis to the Legislative Budget Office. These reports shall include, but are not limited to, an accounting of all funds spent and participant statistics medical program, the CHIP program, the Dialysis Transportation program, and each of the Home- and Community-Based Waiver programs, and an accounting of all funds spent in the administrative program.

The Division of Medicaid shall perform its cash flow projections on a predetermined monthly schedule and make this and any other information requested available, upon request, to the Chair of the Senate Public Health and Welfare Committee, the House Public Health and Human Services Committee, the House Medicaid Committee, the House and Senate Appropriations Committees as well as the Legislative Budget Office.

SECTION 12. Of the funds appropriated in this act, the Division of Medicaid shall pay the maximum per diem rate allowed by federal law or regulation to providers of adult day services for each day of service provided to an eligible beneficiary. In order to receive this per diem rate of reimbursement, providers of adult day services shall participate in the Elderly and Disabled Waiver Program for Home- and Community-Based Services.

SECTION 13. In the division's Fiscal Year 2018 budget submission, all Medicaid 1915 (C) Home- and Community-Based Waivers shall be presented as a budget program separate from the Medical Services Program.

SECTION 14. The Division shall transfer One Million Dollars (\$1,000,000.00) of State Support Funds to the Department of Rehabilitation Services for the support of the Independent Living Home- and Community-Based Waiver program and shall transfer One Million Dollars (\$1,000,000.00) of State Support Funds to the Department of Human Services to support the Home Delivered Meals program.

SECTION 15. Of the funds appropriated under the provisions of this act, Two Million Seven Hundred Fifty Thousand Dollars (\$2,750,000.00) are provided for the purpose of funding a temporary program to provide nonemergency transportation to locations for necessary dialysis services for end-stage renal disease patients who are sixty-five (65) years of age or older or are disabled as determined under Section 1614(a)(3) of the federal Social Security Act, as amended, whose income did not exceed one hundred thirty-five percent (135%) of the nonfarm official poverty level as defined by the Office of Management and Budget and whose eligibility was covered under the former category of eligibility known as Poverty Level Aged and Disabled (PLADS). One Hundred Eighty-two Thousand Five Hundred Thirty-five Dollars (\$182,535.00) of the amount provided in this section, as originally authorized in HB 865 of the 2009 Regular Session, shall come from Treasury Fund 3322.

SECTION 16. Of the funds appropriated in Sections 1 and 3,
Three Hundred Ninety-eight Thousand Five Hundred Fifty Dollars

(\$398,550.00) General Funds and One Million One Hundred One Thousand Four Hundred Fifty Dollars (\$1,101,450.00) Special Funds are provided for five (5) slots in the Assisted Living Waiver program for persons with Traumatic Brain Injury and in need of Cognitive Rehabilitation. The Division shall develop eligibility criteria for these additional slots.

SECTION 17. It is the intention of the Legislature that the funds appropriated in this act to the Governor's Office - Division of Medicaid for the Mississippi Coordinated Access Network (MS-CAN) program be used in the most efficient and effective manner possible to achieve the intended mission of the division. The division and the coordinated care organizations with which the division has contracted to conduct the MS-CAN program shall establish baselines for the health-related outcome measurement for each of the following health focus areas for presentation at the Joint Legislative Budget Committee hearings for fiscal year 2017, which will be used as the baseline levels for establishing targets for improvements in quality of care performance measures for the MS-CAN program in fiscal year 2017 and later fiscal years:

Health Focus Area

Blood sugar well controlled in people with diabetes

Asthma-related emergency room (ER) visits

Measurement

Percentage of members with HbAlc results less than or equal to 8.0%

Percentage reduction in

asthma-related ER visits

Congestive heart failure (CHF)

Percentage decrease in CHF-Related hospital

readmissions

Obesity

Percentage of persons age
eighteen and older classified
as having a documented Body
Mass Index (BMI) of 30.0 or
more regardless of sex

In addition, for comparison purposes, these same baselines for the health-related outcome measurements shall be established for similar Medicaid recipients who are not enrolled in the MS-CAN program.

SECTION 18. Of the funds appropriated herein, an amount not to exceed Three Hundred Thousand Dollars (\$300,000.00) is provided for payments to certain eligible obstetricians and gynecologists for the provision of certain primary care services, as defined by the division, at up to one hundred percent (100%) of the Medicare Physician fee schedule.

section 19. Of the funds appropriated in Section 1, a sum not to exceed Two Hundred and Fifty Thousand Dollars (\$250,000.00) is provided for the Division of Medicaid to expend funds for an outside consultant to perform an operational and performance assessment in order to evaluate and recommend changes to the structure, process and resources of the Governor's Office, Division of Medicaid, in light of the shift from fee-for-service,

expansion of the Mississippi Coordinated Access Network program and the implementation of the Mississippi Hospital Assess Payment program. The consultant hired using these funds shall be chosen by the Department of Finance and Administration using a competitive process, and shall be a firm with a positive national reputation and experience with Mississippi's Medicaid program, but shall not currently hold a contract with the Division of Medicaid. The consultant hired shall deliver a report addressing these and such additional issues as the Department of Finance and Administration may determine appropriate, and shall submit a report of its findings and recommendations not later than November 1, 2016. The Department of Finance and Administration shall coordinate with the Division of Medicaid so as to supplement this appropriated amount with Federal Medical Assistance Percentage for Administrative Services.

SECTION 20. Of the funds appropriated herein, Five Hundred Thousand Dollars (\$500,000.00) shall be allocated to the Delta Health Alliance for a Patient Centered Medical Model Home in Leland, Mississippi.

SECTION 21. No funds appropriated by this act may be expended until the Division of Medicaid provides for the reimbursement of long acting reversible contraceptives (LARCs) insertion at the time of delivery, outside of the current Medicaid All Patient Refined-Diagnosis Related Group Version (APR-DRG) payment methodology, to Medicaid Enrolled hospital providers, and

the Division of Medicaid considers the coverage of LARC insertion at the time of delivery to be an add-on benefit, paid according to a payment schedule developed by the Division, that is not included in the APR-DRG reimbursement process.

SECTION 22. Of the funds appropriated in Sections 1, 2, 3 and 4, funds are provided for Phase One (1) and Phase Two (2) of the Mississippi Delta Medicaid Population Health Demonstration Project.

SECTION 23. The money herein appropriated shall be paid by the State Treasurer out of any money in the State Treasury to the credit of the proper fund or funds as set forth in this act, upon warrants issued by the State Fiscal Officer; and the State Fiscal Officer shall issue his warrants upon requisitions signed by the proper person, officer or officers, in the manner provided by law.

SECTION 24. This act shall take effect and be in force from and after July 1, 2016.

PASSED BY THE HOUSE OF REPRESENTATIVES

April 18, 2016

SPEAKER OF THE POUSE OF REPRESENTATIVES

PASSED BY THE SENATE

April 18 2016

PRESIDENT OF THE SENATE

APPROVED BY THE GOVERNOR

GOVERNOR

10.46 pm